



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL.: 587-0460 FAX: 587-0470

RECEIVED

P14
9-10-03

LOBBYIST REGISTRATION FORM

(See back of this form for instructions)

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

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PART I LOBBYIST

NAME(Last)	(First)	(Middle)	TELEPHONE
Rosehill	Linda	K.	536-2611
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
1088 Bishop Street, Suite 1010	Honolulu	HI	96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			(City) (State) (Zip Code)

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
GeoPlasma, LLC	(800) 345-7506
MAILING ADDRESS (Street)	(City) (State) (Zip Code)
1000 Abernathy Road, #1250	Atlanta GA 30328
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Robert G. Klein, Esq.	529-7300
MAILING ADDRESS (Street)	(City) (State) (Zip Code)
5 Waterfront Plaza, 500 Ala Moana Blvd., Honolulu	HI 96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy, Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Linda Rosehill
(Signature of Lobbyist)

4-7-03
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Robert G. Klein	Attorney
NAME OF ORGANIZATION (if applicable)	TELEPHONE
GeoPlasma, LLC	529-7300
MAILING ADDRESS (Street)	(City) (State) (Zip Code)
5 Waterfront Plaza, 500 Ala Moana Blvd.	Honolulu HI 96813
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.	
<i>Robert G. Klein</i> (Signature of Authorizing Officer or Person Represented)	4-7-03 (Date)